	-		ORDER FO	OR SUPP	LIES OR	SERVI	CES				PAG	GE 1 OF 14	
1. CONTRACT/PURCH.	ORDER	1	2. DELIVERY ORDE	R/ CALL NO.	3. DATE OF ORE	DER/CALL	4. REQ./ PU	URCH. REQUES	r no.		5. PRIORI	ΓY	
AGREEMENT NO. DAKF11-99-D-0012			002001		2001Jul06		MIPR1H	R1H-K3B0-66BD				1	
6. ISSUED BY		COL	DE DAKF11	7. A	DMINISTERED	) BY		COD	Е		4		
ARMY ATLANTA CONTRACTING CENTER HQ USA FORSCOM DCSLOG CD 1301 ANDERSON WAY SW FORT MCPHERSON GA 30330-1096					SEE ITEM 6						8. DELIVERY FOB  X DEST  OTHER  (See Schedule if other)		
9. CONTRACTOR		dop	DE 08MB5		FACILITY		10. DI	CLIVER TO FOD		(Date)		K IF BUSINESS IS	
LEAR SIEGLER SERVICES, INC DAVE CAROTHERS 175 ADMIRAL COCHRAN DRIVE ANNAPOLIS MD 21401				Net 30				SEE SCHEDULE ISCOUNT TERMS 10 Days  MAIL INVOICES TO THE ADDI			SMALL SMALL DISADVANTAGED WOMEN-OWNED		
							- 1	MAIL INVOIC Schedule	ES TO TI	HE ADD	RESS IN E	BLOCK	
14 SHIP TO CODE AFLG01  DCSLOG DEPUTY CHIEF OF STAFF FOR  DAVID GRASS AFLG FMMC  1777 HARDEE AVE SW B200  FORT MCPHERSON GA 30330-1062				DF/ ORI PO	L5. PAYMENT WILL BE MADE BY CODE HQ0301  DFAS DEFENSE FINANCE AND ACCOUNTING  ORLANDO PO BOX 934400 2500 LEAHY  ORLANDO FL 32893-4400						MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.		
16. DELIVER	Y/ X This delivery order/call is issued on another Govt. agency or in accordance with and subject to terms and conditions of above numbered contract.												
						on terms specified herein.							
NAME OF CO		ORDER AS AND CONI	IT MAY PREVIO	SIGNATU	E BEEN OR IS N GREES TO PER JRE	NOW MOD RFORM TH	IFIED, SUI E SAME.	FYPED NAM	L OF TH	E TERM	s	DATE SIGNED (YYYYMMMDD)	
17. ACCOUNTING See Schedule	AND A	PPROPRIATIO	ON DATA/ LOCA	L USE									
			CHEDULE OF SU	UPPLIES/ SERVICES			20. QUANTITY ORDERED/ ACCEPTED* 21. UNIT 22.			22. UN	IT PRICE	23. AMOUNT	
			SCHEDU	_									
* If quantity accepted by the quatity ordered, indicate by	y X. If di	fferent, enter actual	1		TED STATES OF AMERICA					25. <sup>2</sup>	TOTAL	\$467,314.00	
quantity accepted below quantity ordered and encircle  BY: MARY ANNE OSBORN						CONTRACTING / ORDERING OFFICER				DIFF	ERENCES		
26. QUANTITY IN COLUMN 20 HAS BEEN  INSPECTED RECEIVED ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED  27. SHIP NO. 28. DO VOUCHER NO. INITIALS  PARTIAL FINAL 32. PAID BY 33. AMOUNT CORRECT F.						AMOUNT							
DATE SIGNATURE OF AUTHORIZED GOVT, REP. 31 PAYMENT							1						
36. I certify this account is correct and proper for payment.  COMPLETE PARTIAL									34.	CHECK N	UMBER		
DATE SIGNATURE AND TITLE OF CERTIFYING OFFICER FINAL 3:						35.	5. BILL OF LADING NO.						
37. RECEIVED AT	DAT 38. RECEIVED BY 39. DATE RECEIVED 40. TOTAL CONTAINERS 41. S/R ACCOUNT NO. 42. S		2. S/R VOUCHER NO.										

DD Form 1155, JAN 1998 (EG)

PREVIOUS EDITION MAY BE USED.

## SECTION SF 30 BLOCK 14 CONTINUATION PAGE

This is a cost plus fixed fee task order for KFOR Maintenance Program (Kosovo), Fort Benning, GA. Logistical support services include logistical task areas 1,14, and 16.

Contractor shall invoice per instructions in the schedule.

## 1. PERFORMANCE PERIODS:

PERIOD	DATES			
Phase-in	6 July 2001 – 31 July 2001			
Base period	1 August 2001 – 30 September 2001			
Option period 1	1 October 2001 – 30 September 2002			

## 2. OBLIGATED FUND RECAP:

ACRN AA CLINs 0003, 0004 and 0005 are funded for total amount of \$467,314.00 Requisition No. MIPR1H-K3B0-66BD

## 3. INVOICING INSTRUCTIONS:

- a. The contractor shall submit original plus one copy of invoice [SF 1034] Public Voucher for Purchases and Services, through their cognizant DCAA to the Contracting Officer at address in Block 6.
- b. Submit one "copy" of the SF 1034 to the primary task order monitor as identified in the Performance Work Statement. Invoices shall not be submitted more often than once every two weeks.

Cost plus fixed fee award vouchers shall be submitted pursuant to FAR 52.216-7, and shall, as a minimum, include the following documentation:

- a. The total price for the current billing period and the cumulative billed for the current fiscal year. These costs shall be shown by CLIN or sub-CLIN level.
- b. Include supporting documentation, by CLIN, for amounts invoiced. Supporting documentation must be broke-out in detail to substantiate the total amount requested for reimbursement.
- c. Travel costs shall be broken out by occurrence, with itinerary, dates of travel, number and category of employee travel, per diem costs, transportation costs. Include the government approval with supporting documentation. Travel shall be in accordance with FAR part 31.205-46 and per diem rates will be in accordance with the Joint Travel Regulation.
- d. The contractor shall submit proposed final indirect cost rates and completion [FINAL] voucher in accordance with FAR 52.216-7 and the instructions contained in award at G.3, paragraph B.
- e. The task order monitor will send the Contracting Officer the Invoice Review and Approval (Attachment 10 of the Ordering Guide) at address in Block 6 via fastest method within five days of receipt. The Contracting Officer will certify services on SF 1034 and send to the paying office within the allowable timeframe established in the Prompt Payment Act as amended.